## BEFORE THE DIVISION OF MEDICAL QUALITY BOARD OF MEDICAL QUALITY ASSURANCE DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the Accusation Against:

EDWIN H. FORD, M.D. Certificate No. A-18857

Respondent

No. D-3031

## DECISION

The attached Stipulation is hereby adopted by the Division of Medical Quality of the Board of Medical Quality Assurance as its Decision in the above-entitled matter.

This Decision shall become effective on December 15, 1983

IT IS SO ORDERED November 15, 1983

DIVISION OF MEDICAL QUALITY BOARD OF MEDICAL QUALITY ASSURANCE

MILLER MEDEARIS

Secretary-Treasurer

1	GEORGE DEUKMEJIAN, Attorney General
2	of the State of California LAWRENCE C. KUPERMAN,
3	Deputy Attorney General 110 West A Street, Suite 700 San Diego, California 92101
4	Telephone: (619) 237-7309
5	Attorneys for Complainant
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8	BEFORE THE
9	DIVISION OF MEDICAL QUALITY
10	BOARD OF MEDICAL QUALITY ASSURANCE
11	DEPARTMENT OF CONSUMER AFFAIRS
12	STATE OF CALIFORNIA
13	
14	In the Matter of the Accusation ) No. D-3031
15	Against: )
16	EDWIN H. FORD, M.D. ) 4023 Birch Street ) STIPULATION AND
17	Newport Beach, CA 92714 ) DECISION OF THE BOARD
18	Certificate No. A-018857
	Respondent. )
19	ACDEED BY AND DETUEN
20	IT IS HEREBY STIPULATED AND AGREED BY AND BETWEEN
21	THE PARTIES to the above-entitled matter that the following
22	allegations are true.
23	1. Robert Rowland, complainant herein and Executive
24	Director of the Board of Medical Quality Assurance of the State
25	of California, is represented by John K. Van De Kamp, Attorney

COURT PAPER STATE OF CALIFORNIA STD. 113 (REV. 8-72)

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Deputy Attorney General.

General of the State of California by Lawrence C. Kuperman,

- 2. Edwin H. Ford, M.D., (hereinafter respondent) is represented by Douglas Liechty, Esq. who has been retained as his attorney in connection with this stipulation. Respondent has counseled with Douglas Liechte concerning the effect of this stipulation, which respondent has carefully read and fully
  - 3. Respondent has received and read the accusation which is presently on file and pending as Case No. D-3031 before the Division of Medical Quality of the Baord of Medical Quality Assurance, State of California.
  - 4. Respondent understands the nature of the charges alleged in the above-mentioned accusation and that the charges and allegations if proved would constitute cause for imposing discipline upon respondent's medical license issued by the Board of Medical Quality Assurance.
  - 5. Respondent and his counsel are aware of each of respondent's rights including the right to a hearing on the charges and allegations, the right to confront and cross-examine witnesses who may testify against him, the right to present evidence in his favor and call witnesses on his behalf, the right to testify himself, the right to contest the charges and allegations, the right to reconsideration, review by the Superior Court and to appeal to any other court, and any other rights which may be accorded to him pursuant to the California Administrative Procedure Act (Government Code section 11500 et seq.). Respondent understands that in signing this stipulation rather than contesting the accusation, he is enabling the

understands.

Division of Medical Quality of the Board of Medical Quality
Assurance to issue the following order from this stipulation
without further action.

6. Respondent freely and voluntarily waives each and every one of the rights set forth hereinabove, and for the sole purpose of this proceeding before the Division of Medical Quality and no other, does not contest the following charges in the accusation:

A. In or about 1959, respondent was issued physicians and surgeons certificate No. A-018857 by the Board. The license is in good standing.

B. On or about 10-30-80, respondent undertook a planned home delivery of patient Manager Signature. The pregnancy was Mrs. Signature is first.

Prior to the start of labor, Mrs. Second's pregnancy had exceeded 42 weeks of gestation and had entered the 43rd week. On her last prenatal visit to Doctor Ford, Mrs. Second exhibited signs of pre-eclampsia with proteinuria and hypertension of 140/90.

Mrs. See went into labor on October 30, 1980, at approximately 4:00 p.m. She was attended by midwife Cathy Tredzise until respondent arrived at 0315, October 31, 1980.

At approximatley 0400, respondent artificially ruptured the membranes. The amniotic fluid appeared to be stained with blood and small amounts of greenish-brown material.

Between 0400 and 0500, the baby's heartbeat slowed to approximately 100 beats per minute.

At approximately 0500, respondent began administering a labor-inducing drug intramuscularly alternating arms every 20 minutes for a total of approximately six injections.

At approximately 0630, respondent performed an episiotomy and a baby girl was born shortly thereafter. At the time of birth, the baby was covered with a dark, thick, greenish material and blood, and she was not breathing. Respondent slapped the baby's feet and a small bulb syringe was used to clean out the baby's mouth and nasal passages. Oxygen bag breathing of the baby was carried out by respondent.

The baby was taken to the Long Beach Memorial Hospital where at the time of admission meconium was found in the baby's lungs and she had a pulse rate of 60 beats per minute with supportive measures. The baby did not breathe spontaneously.

After taking the baby to the hospital, respondent returned to the home of Mrs. Show where he attempted to repair the episiotomy. After the repair, no post-partem instructions were given to Mrs. Show, and later in the day, a request for pain medication by Mrs. Show was refused by respondent.

After the baby's admission to the hospital, Mrs.

show was notified by the hospital the baby was in critical condition and it was suggested that she and her husband come to the hospital. Mrs. Show was unable to walk and was carried into the hospital on a stretcher. Mrs. Show was thereafter admitted into the emergency room with a temperature of 101

degrees, and blood pressure of 160 to 130/110, and a problem with fluid retention. Mrs. State had internal bleeding in the site of the episiotomy with resultant vulvovaginal hematoma.

Mrs. State required surgery and treatment for her condition.

The baby died on November 1, 1980, from meconium aspiration as a result of respondent's improper care.

The license of respondent is subject to disciplinary action pursuant to Business and Professions Code section 2234(b) and (d) in that respondent was grossly negligent and incompetent in his treatment of Manual Samuel and her baby, as follows:

- 1) Respondent failed to recognize Mrs.

  Simple's pregnancy as high risk to both the baby and mother requiring an institutional birth with available back-up care.
- 2) Respondent failed to recognize and/or take steps to deal with signs of fetal distress during labor, and failed to intubate the baby after birth; and
- 3) Respondent failed to properly repair Mrs. States 's lacerations and to give follow-up care for her toxemia after the baby was born.
- 7. Based on the foregoing stipulations and recitals, it is stipulated and agreed that the Division of Medical Quality may issue the following decision and order.

## ORDER

It is hereby orered that license number A-018857 issued to respondent Edwin H. Ford, M.D., is revoked. However,

the revocation is stayed and respondent is placed on probation for ten years on the following terms and conditions:

A. Respondent shall not practice in the fields of obstetrics and gynecology until and unless the following conditions have been satisfied:

- 1) Respondent shall submit to the Division for its prior approval, an intensive clinical training program in obstetrics and gynecology. The exact number of hours and the specific content of the program shall be determined by the Division or its designee, but it shall be the equivalent to a one year residency type program in an accredited hospital.
- training program, respondent shall take and must pass an oral/clinical examination in obstetrics and gynecology to be administered by the Division or its designee. If respondent fails this examination, respondent must wait three months between reexaminations, except that after three failures respondent must wait one year to take each necessary reexamination thereafter. The Division shall pay the cost of the first examination and respondent shall pay the cost of any subsequent examinations. Respondent shall not practice obstetrics or gynecology until respondent has passed this examination and has been so notified by the Division in writing

3) After passing the oral/clinical examination, for a period of one year, respondent may only practice obstetrics and gynecology in a supervised, structured environment approved by the Division or its designee, in which respondent's activities will be overseen and supervised by another physician.

This prohibition against practicing obstetrics and gynecology shall not extend to the performance of standard pelvic examinations, including pap smears, performing standard pregnancy testing, or treating minor vaginal infections. The prohibition does apply to, and respondent is prohibited from performing any therapeutic abortions, including but not limited to dillitation and curettage, dillitation and evacuation, saline abortions, and prostaglandin induced abortions.

Until such time as respondent may practice obstetrics and gynecology, respondent shall refer any such cases to a competent physician, Board certified or Board eligible in obstetrics and gynecology.

B. Within 90 days of the effective date of this decision and on an annual basis thereafter during the period of probation, respondent shall submit to the Division for its prior approval an educational program or course in general medicine which shall not be less than 40 hours per year for each year of probation. This program shall be in addition to the Continuing Medical Education requirements for re-licensure.

C. Respondent shall obey all federal, state and local laws, and all rules governing the practice of medicine in California.

- D. Respondent shall submit quarterly declarations under penalty of perjury on forms provided by the Division, stating whether there has been compliance with all the conditions of probation.
- E. Respondent shall comply with the Division's probation surveillance program.
- F. Respondent shall appear in person for interviews with the Division's medical consultant upon request at various intervals and with reasonable notice.
- G. In the event respondent should leave California to reside or to practice outside the state, respondent must notify in writing the Division of the dates of departure and return. Periods of residency or practice outside California will not apply to the reduction of this probation period.
- H. Upon successful completion of probation, respondent's certificate will be fully restored.
- I. If respondent violates probation in any respect, the Division, after giving respondent notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an accusation or petition to revoke probation is filed against the respondent during probation, the Division shall have continuing jurisdiction until the matter is final and the period of probation shall be extended until the matter is final.

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I concur in the stipulation and order.

Dated: 10-19-83

JOHN K. VAN DE KAMP, Attorney General LAWRENCE C. KUPERMAN,

Deputy Attorney General

LAWRENCE C. KUPERMAN,

Deputy Attorney General

Attorneys for Complainant

I concur in the stipulation and order.

Dated: 9-19-83

DOUGLAS LINCHTY, Esq.

Attorney for Respondent

I have read the above stipulation fully and have discussed it with my counsel. I understand that by its terms I will be waiving certain rights accorded me under California law. I also understand that by its terms the Board of Medical Quality Assurance will issue a Decision and Order on this stipulation whereby my license to practice medicine will be subject to certain terms and conditions. I agree to the above stipulations for settlement.

Dated: 10-11-83

EDWIN H. FORD, M.D

Respondent

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JOHN K. VAN DE KAMP, Attorney General
   LAWRENCE C. KUPERMAN,
               Deputy Attorney General
   110 West A Street, Suite 700
3 San Diego, California 92101
   Telephone: (619) 237-7309
   Attorneys for Complainant
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                               BEFORE THE
                   BOARD OF MEDICAL QUALITY ASSURANCE
                      DIVISION OF MEDICAL QUALITY
9
                          STATE OF CALIFORNIA
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   In the Matter of the Accusation
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   Against:
                                                 ACCUSATION
12
       EDWIN H. FORD, M.D.
       4023 Birch Street
13
       Newport Beach, California 92660
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       Certificate No. A-018857
15
                       Respondent.
16
             Complainant, Robert Rowland, alleges:
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                 He is the Executive Director of the Board of
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19 Medical Quality Assurance and makes this accusation in his
20 official capacity.
                 In or about 1959, respondent was issued physicians
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             2.
22 and surgeons certificate No. A-018857 by the Board. The license
23 is in good standing.
                 Business and Professions Code (hereinafter "Code")
24
             3.
25 section 2220 authorizes the Division of Medical Quality to take
26 disciplinary action against the holder of a physician and
27 surgeon's certificate who commits unprofessional conduct.
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- 1 4. Code section 2234(b) and (d) provide that
- 2 unprofessional conduct includes gross negligence and
- 3 incompetence, respectively.
- 5. On or about 10-30-80, respondent undertook a
- 5 planned home delivery of patient Marie Santa. The
- 6 pregnancy was Mrs. States's first.
- 7 Prior to the start of labor, Mrs. Start's pregnancy
- 8 had exceeded 42 weeks of gestation and had entered the 43rd
- 9 week. On her last prenatal visit to Dr. Ford, Mrs. State
- 10 exhibited signs of pre-eclampsia with proteinuria and
- 11 hypertension of 140/90.
- Mrs. Shelley went into labor on October 30, 1980, at
- 13 approximately 4:00 p.m. She was attended by midwife Cathy
- 14 Tredzise until respondent arrived at 0315, October 31, 1980.
- 15 At approximatley 0400, respondent artificially ruptured
- 16 the membranes. The amniotic fluid appeared to be stained with
- 17 blood and small amounts of greenish-brown material.
- Between 0400 and 0500, the baby's heartbeat slowed to
- 19 approximately 100 beats per minute.
- 20 At approximately 0500, respondent began administering a
- 21 labor-inducing drug intramuscularly alternating arms every 20
- 22 minutes for a total of approximately six injections.
- 23 At approximately 0630, respondent performed an
- 24 episiotomy and a baby girl was born shortly thereafter. At the
- 25 time of birth, the baby was covered with a dark, thick, greenish
- 26 material and blood, and she was not breathing. Respondent
- 27 slapped the baby's feet and a small bulb syringe was used to

- 1 clean out the baby's mouth and nasal passages. Oxygen bag
- 2 breathing of the baby was carried out by respondent.
- The baby was taken to the Long Beach Memorial Hospital
- 4 where at the time of admission meconium was found in the baby's
- 5 lungs and she had a pulse rate of 60 beats per minute with
- 6 supportive measures. The baby did not breathe spontaneously.
- 7 After taking the baby to the hospital, respondent
- 8 returned to the home of Mrs. States where he attempted to repair
- 9 the episiotomy. After the repair, no post-partem instructions
- 10 were given to Mrs. State, and later in the day, a request for
- 11 pain medication by Mrs. States was refused by respondent.
- 12 After the baby's admission to the hospital, Mrs.
- 13 S was notified by the hospital the baby was in critical
- 14 condition and it was suggested that she and her husband come to
- 15 the hospital. Mrs. S was unable to walk and was carried
- 16 into the hospital on a stretcher. Mrs. Shall was thereafter
- 17 admitted into the emergency room with a temperature of 101
- 18 degrees, and blood pressure of 160 to 130/110, and a problem
- 19 with fluid retention. Mrs. State had internal bleeding in the
- 20 site of the episiotomy with resultant vulvovaginal hematoma.
- 21 Mrs. S required surgery and treatment for her condition.
- The baby died on November 1, 1980, from meconium
- 23 aspiration as a result of respondent's improper care.
- 24 The license of respondent is subject to disciplinary
- 25 action pursuant to Business and Professions Code section 2234(b)
- 26 in that respondent was grossly negligent in his treatment of
- 27 Marianne Shelley and her baby as follows:

1	a. Respondent failed to recognize Mrs. See 's
2	pregnancy as high risk to both the baby and mother requiring an
3	institutional birth with available back-up care.
4	b. Respondent failed to recognize and/or take steps
5	to deal with signs of fetal distress during labor, and failed to
6	intubate the baby after birth; and
7	c. Respondent failed to properly repair Mrs. Shelley's
8	lacerations and to give follow-up care for her toxemia after the
9	baby was born.
10	7. The license of respondent is subject to
11	disciplinary action pursuant to Business and Professions Code
12	section 2234 (d) in that respondent was incompetent in connection
13	with Kathleen Shelley and her baby as more particularly alleged
14	in paragraph six.
15	WHEREFORE, complainant requests that the Board hold
16	a hearing on the matters alleged herein and following said
17	hearing take disciplinary action as is provided in Code section
18	2227, and take such other and further action as may be proper.
19	DATED: March 22, 1983.
20	Sylver . CH
21	ROBERT ROWLAND Executive Director
22	( Board of Medical Quality Assurance State of California
23	Complainant
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